



More than meets the eye...

THE ELVER PROGRAM – AN INNOVATIVE PARTNERSHIP BETWEEN SWSLHD AND DCJ



Where does the name Elver come from?

Elver is the name of a baby eel

Parramatta means 'place of the eels' in the local language of the Burramattagal people of the Dharug nation

'going back to their traditional waterhole where they belong'

The Elver Programme: increasing opportunities to connect and a place to 'belong'



The Elver Program

Partnership between DCJ and SWSLHD to deliver :

- ❖ Specialist multi-disciplinary clinical services to children under 18 years in statutory OOHC with intensive and complex needs
- ❖ Consultation and capacity building
- ❖ Contribute to the evidence base effectively treat trauma



About us...

Multi-disciplinary team: Psychiatry, OT, Speech pathologist, Clinical Psychologist, CNC, SW, mental health clinicians, admin, DCJ Manager

Our Young People

Children with complex mental health needs, behavioural challenges + significant trauma histories.

Model of care

Interventions based on the presentation of the young person and the needs of the system around them. They include:

- ❖ Specific assessments and interventions:
- ❖ Assessment, education and support of the care system
- ❖ Highlighting the needs of the child
- ❖ Facilitating co-ordination of various systems particularly at transition points.

Self Harm in OOHC

Neglect is the most powerful predictor of self-destructive behaviour

This implies childhood trauma contributes heavily to the initiation of self-destructive behaviour

Lack of secure attachments maintains it



Locus of Control

Commonly the shift is from:

Passive experience of intense, diffuse, emotional tension over which we have *no control*

To

Active experience, intense, focused, sensory pain that is *within our control*

Self Harm from OT perspective

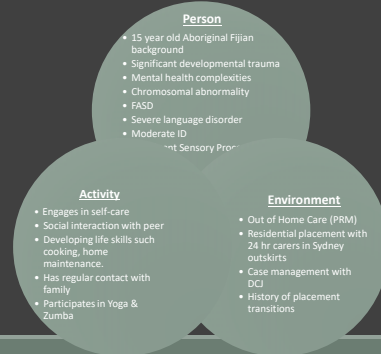
Self-harm impacts on participating in meaningful activity and roles

Self-harm can be orienting, disorienting or to influence responses from others.

Self-harm can be used for regulation

Comprehensive assessment involves observation, standardised assessment and caregiver report.

Sensory modulation approaches can be used to address self-harm.



Exploring Self-Harm: Person Factors

Moderate Intellectual Disability (functioning as a 6 yr old)

Severe Language Disorder (receptive & expressive)

Sensory Processing Difficulties

Attachment Difficulties

Mental Health Complexities

Exploring Self-Harm: Environment Factors

Rotating care team

Shift workers & complex staffing

Training of caregivers

Need to manage other YP with complex needs

Shared case management b/w DCJ & NGO

Distilled info

Exploring Self-Harm: Activity Factors

- Needs proactive support to engage in activities
- Needs opportunities for developmentally appropriate play and socialisation
- Access to education
- Difficulties with unstructured times
- Difficulties with transitions b/w activities
- Needs structured routine

Exploring Self-Harm with Caregivers

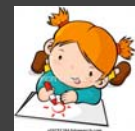
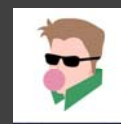
- What are the precipitants to the self-harm incident?
 - Consider routine unstructured time, changes in caregivers, use of visuals, environmental changes, conflict with caregivers or peers
- What did the self-harm incident look like?
 - Consider length of incident, if anyone present how they responded, what the self-harm looked like (cutting, head banging, insertion).
- What happened after the self-harm incident?
 - Consider caregivers response, whether emergency services involved, whether caregiving responses appear to be reinforcing.
- Reflection on self-harm incident
 - Exploring function, whether other strategies were trialled or barriers to use, exploring impact of incident on functioning (school, social, routine, relationships)

Goal: Reduce self-harm to enhance participation in meaningful activity

- Strategies to achieve goal:
- Increase adaptive coping skills and emotion regulation strategies through sensory modulation approaches
 - Support development of communication skills and share communication supports with care team
 - Support creation of meaningful developmentally appropriate routine augmented by visual aides
 - Work with system to share understanding of person, environmental and activity factors impacting on self-harm.
 - Input into care team model of practice (ARC)

The Senses

How do you modulate sensation?



Sensory Modulation Strategies for Sam

MOUTH	TOUCH	LOOK	LISTEN	MOVE	BALANCE	SMELL
Sensory chew toys/ blow toy	Weighted toy	Where's Wally Book	Music	Swimming	Yoga	Baking
Crunchy foods	Fidget balls	Glitter Lamp	Television (Disney)	Zumba	Trampoline	Lotions/ creams
Hot chocolate	Tight fitting seamless shirts	Colouring in	Quiet	Throwing and catching ball	Rocking chair	Perfumes

Summary- Key Considerations

- There is no one size fits all approach
- Essential to consider the child's perspective and work with key people in their system
- When considering self-harm it is important to consider how the environment, person and activity are interacting to produce the harmful behavior.

There is always much more than meetings the eye and a child is much more than the behavior that they present with!